

Balhousie Coupar Angus Care Home Service

Station Road
Coupar Angus
Blairgowrie
PH13 9AL

Telephone: 01828 424930

Type of inspection: Unannounced
Inspection completed on: 5 October 2017

Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Care service number:
CS2010274577

About the service

Balhousie Coupar Angus provides a care home service to older people. The care home is purpose-built and is designed to meet the needs of older people and those with Dementia. It is situated within the small town of Coupar Angus and has access to resources within the community such as local health services and community facilities.

Accommodation is provided for 41 older people with places for 10 people within a specialist dementia unit.

The accommodation comprises of two units on the ground floor, one of which is a dedicate dementia unit. A further two units are located on the second floor. All units have communal living/dining areas plus additional quiet spaces. All bedrooms are en-suite and residents are encouraged to bring small items of furniture with them on admission. A passenger lift provides access to the upper floor.

Both ground floor units have direct access to a nicely landscaped, fully enclosed garden area complete with a summerhouse.

Since the last inspection, there has been a change to the management structure and a new manager and deputy are currently in post.

What people told us

We spoke to eight residents and three relatives during our inspection. Residents told us they felt well cared for with their routines and preferences being respected. We also heard they held the staff in high regard and that they were attended to without delay when they needed this. Relatives comments were also positive, and reference was made to the positive impact the new manager has had within the home. One relative advised that staff knew exactly what to do when a resident showed signs of distress and stated the following:

"At the moment I am very pleased with the care my mother receives. There is a very talented, skilled and stable team who meet the needs of people with dementia."

Relatives felt overall communication from the management and staff was good and that residents were offered structure to their day.

We sent out 15 questionnaires to residents and relatives prior to our inspection. Three were returned to us from relatives and two from residents. Comments were overall positive.

Self assessment

We no longer request a self-assessment is sent to us. Instead, we look at the current improvement and development plan held by the service and this is referred to under the management and leadership section of this report.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

What the service does well

Residents we spoke with told us they felt their needs were being met as and when they arose. We were able to see from care plans that these were overall detailed and other health professionals were consulted when this was required, for example with a dietician or a speech and language therapist. We could see improvements had been made to the care, treatment and recording of pressure wounds since the last inspection and this was being monitored effectively. We sampled fluid intake charts, position change charts and managing stress/distress plans and found these to be fully completed and the content evaluated to inform practice. This meant residents health was being monitored. Medication records were well recorded and we could see that those residents who could not ask for pain relief were being observed for signs of any discomfort.

We were advised that the manager had met with the local health centre practice and it was agreed that regular weekly GP visits would be made to the residents. This would ensure all medication reviews are kept up to date and any health concerns responded to quickly. This would also improve continuity of care for residents and promote closer links with health care professionals.

The meal time experience for residents was carried out efficiently with enough staff to provide any assistance required. We noted that staff were open and friendly in their manner and approach to residents. We found staff were aware of individual residents needs. This supported an appropriate and consistent level of care.

It was pleasing to note that a variety of meaningful activities were provided for residents and also this was included in their every day living. An example we saw was one resident who liked to be kept busy was able to assist with small tasks such as dusting and helping with the setting of tables. This provided a sense of involvement and satisfaction for the resident who retained some independence.

We heard from the manager that the service were supporting student nurse placements within the care home and a staff mentor had been identified to support their experience. We also heard other staff had taken responsibility for oral health care and moving and handling training within the home. Other areas of leadership were also being explored within the team. This promoted the continual development of staff.

We were able to see that the management team offered regular supervision to the team. This is important so that staff feel valued and supported in their roles. The questionnaires completed from staff that were returned to us indicated that the current manager supported them well and that there was a marked improvement of stability within the current staff team.

We saw that good progress with a variety of audits were in place, and in particular there was good analysis of accidents, incident and falls. The service also monitored any complaints received, at the time of our inspection there were none outstanding.

The manager had produced an overall development and action plan based on the audits undertaken within the service. We felt this was detailed and took into account actions that needed to be taken from the findings of the individual audits.

In conclusion, we felt that the current management structure has provided positivity, stability and support to both staff and residents.

What the service could do better

There were small areas for improvement we identified and discussed with the management team. We noted that not all creams prescribed for residents were used in accordance with the prescribed frequency and some residents who had a variety of daily creams to be applied were not always receiving this. This is important to ensure skin is monitored and does not break down. We have made a recommendation below in this regard. Care should also be taken to ensure that anything noted on body maps are also highlighted in the skin care plans. Falls information should inform the updates to evaluations and falls diaries, in one instance this was not carried out. However, overall the sample of records we looked at relating to falls were recorded well.

We heard that the manager was putting together a register that would indicate who held any welfare powers for residents or if capacity assessments were requested. We advised that it would be helpful to include relevant consents that are required, for example for equipment such as bed rails or lap belts for wheelchairs.

It would be of benefit to residents if staff were to use pictorial aids to communicate with some residents who find it hard to verbally express their needs. Care should be taken to ensure where days of the week and dates and displayed in communal areas, that these are accurate as this could add to people's confusion.

We heard that the care reviews for residents were previously not carried out, therefore some of the reviews are still to be undertaken. The manager is making good progress with this. These are important to ensure other health professionals are consulted with the continuing care for people as well as family members or those holding welfare powers. We advised that the reviews should clearly identify actions carried forward from previous reviews and what will be taken forward that will ensure positive experiences for residents.

We discussed with the manager that direct observation of staff practice as part of the overall audits would enhance this work, as well as identifying any training or development that staff would need. The manager has agreed to take this forward.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The application of creams and ointments for residents should be in accordance with the prescribed frequency.

This is to meet National Care Standard 15 Care Homes for Older People - Keeping Well - Medication

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Inspection and grading history

Date	Type	Gradings	
11 Jul 2016	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
15 Oct 2015	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
16 Jan 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
12 Jun 2014	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
19 Nov 2013	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	3 - Adequate
20 Jun 2013	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	2 - Weak
14 Aug 2012	Unannounced	Care and support	5 - Very good

Date	Type	Gradings	
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
7 Dec 2011	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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